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## BIB DATA SHEET

CONFIRMATION NO. 1803

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS                                 | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.       |                                    |
|---|---|---------------------------------------|---|------------------------------|------------------------------------|
| 10/812,298  | 03/29/2004<br>RULE  | 424                                   | 1628  | 067802-3000-001              |                                    |
| <b>APPLICANTS</b><br>Matthieu Guitton, Le Houlme, FRANCE;<br>Jean-Luc Puel, Cournonterral, FRANCE;<br>Remy Pujol, Montpellier, FRANCE;  |   |                                       |   |                              |                                    |
| <b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> SMALL ENTITY **<br>06/10/2004   |   |                                       |   |                              |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /JENNIFER MYONG<br>M KIM/<br>Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance<br><br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>FRANCE | <b>SHEETS<br/>DRAWINGS</b><br>5   | <b>TOTAL<br/>CLAIMS</b><br>9 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>Fanelli Strain & Haag PLLC<br>1455 Pennsylvania Ave., N.W., suite 400<br>Washington, DC 20004<br>UNITED STATES  |   |                                       |   |                              |                                    |
| <b>TITLE</b><br>Methods for the treatment of tinnitus induced by cochlear excitotoxicity  |   |                                       |   |                              |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>595   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                              |                                    |